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Bib Data Sheet

CONFIRMATION NO. 7700

SERIAL NUMBER 10/050,492	FILING DATE 01/16/2002 RULE	CLASS 119	GROUP ART UNIT 3643	ATTORNEY DOCKET NO. TOM7
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APPLICANTS

Tommy J. Shane, Loganville, GA;
 Harvey Swain, Lawrenceville, GA;

**** CONTINUING DATA *******

THIS APPLN CLAIMS BENEFIT OF 60/261,923 01/16/2001
 AND CLAIMS BENEFIT OF 60/316,047 08/30/2001

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 02/14/2002

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 4	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Cap</i> Examiner's Signature	Initials			

ADDRESS

06980

TITLE

Pathogen management system

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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